Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF ARIZONA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	CHRIS First name J Middle name KYRIAKOPOULOS Last name and Suffix (Sr., Jr., II, III)	- - -	RHONDA First name S Middle name KYRIAKOPOULOS Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	•		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1385		xxx-xx-0407

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):					
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.					
	Include trade names and doing business as names	Business name(s)	Business name(s)					
		EINs	EINs					
5.	Where you live	4809 E. MOSSMAN RD	If Debtor 2 lives at a different address:					
		Phoenix, AZ 85054 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code					
		Maricopa						
		County	County					
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.					
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code					
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition,	Check one: Over the last 180 days before filing this petition, I					
		I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.					
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)					

	otor 1 CHRIS J KYRIAKO RHONDA S KYRIA				Case number (if known)			
Par	t 2: Tell the Court About	Your Bankruptcy	Case					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankrup (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	Chapter 7						
		☐ Chapter 11						
		☐ Chapter 12						
		☐ Chapter 13						
8.	How you will pay the fee	about how order. If yo	you may pay. Typically, if yo	ou are paying the fee	eck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money shalf, your attorney may pay with a credit card or check with			
			pay the fee in installments. Fee in Installments (Official		tion, sign and attach the Application for Individuals to Pay			
		☐ I request but is not applies to	that my fee be waived (You required to, waive your fee, a your family size and you are	n may request this opt and may do so only if y unable to pay the fee	ion only if you are filing for Chapter 7. By law, a judge may, your income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out ficial Form 103B) and file it with your petition.			
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes.						
		Distr	ct	When	Case number			
		Distri	ct	When	Case number			
		Distri	ct	When	Case number			
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
		Debt	or		Relationship to you			
		Distri	ct	When	Case number, if known			
		Debt	or		Relationship to you			
		Distri	ct	When	Case number, if known			
11.	Do you rent your residence?	□ No. Go	to line 12.					
		■ Yes. Has	your landlord obtained an e	viction judgment again	nst you?			
			No. Go to line 12.					
			Yes. Fill out <i>Initial Stater</i> bankruptcy petition.	ment About an Eviction	n Judgment Against You (Form 101A) and file it with this			

	otor 1 CHRIS J KYRIAKO ktor 2 RHONDA S KYRIA				Case number (if known)	
Par	t 3: Report About Any Bu	sinesses	You Own	as a Sole Proprie	rietor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.		Part 4.		
		☐ Yes.	Name	and location of bus	pusiness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	ny	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	State & ZIP Code	
	it to this petition.		Check	the appropriate bo	box to describe your business:	
				Health Care Busin	usiness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	eal Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	s defined in 11 U.S.C. § 101(53A))	
				Commodity Broke	oker (as defined in 11 U.S.C. § 101(6))	
				None of the above	ove	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set a deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, st operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the in 11 U.S.C. 1116(1)(B).				of
	For a definition of small	■ No.	I am n	ot filing under Char	napter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.		er 11, but I am NOT a small business debtor according to the definition in the Bankrupto	у
		☐ Yes.	l am fi	ling under Chapter	er 11 and I am a small business debtor according to the definition in the Bankruptcy Coc	le.
Par	t 4: Report if You Own or	Have Any	/ Hazardo	us Property or An	Any Property That Needs Immediate Attention	
14.	Do you own or have any property that poses or is	■ No.				
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	he hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?	?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?		
					Number, Street, City, State & Zip Code	

Debtor 1 CHRIS J KYRIAKOPOULOS
Debtor 2 RHONDA S KYRIAKOPOULOS

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 CHRIS J KYRIAKO otor 2 RHONDA S KYRIA			Case numbe	「 (if known)			
Par	t 6: Answer These Quest	ions for R	Reporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			■ No. Go to line 16b.					
			☐ Yes. Go to line 17.					
		16b.		business debts? Business debts are debts to business debts are debts to business much business debts are debts to business debts are debts to business debts.				
			☐ No. Go to line 16c.	- '				
			Yes. Go to line 17.					
		16c.	State the type of debts you	u owe that are not consumer debts or busines	s debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chap	ter 7. Go to line 18.				
a F a a	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	are paid that funds will be	7. Do you estimate that after any exempt proparation and a stribute to unsecured creditors?				
	are paid that funds will be available for		■ No					
	distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000	□ 25,001-50,000			
		☐ 50-99		☐ 5001-10,000 ☐ 10,001-25,000	☐ 50,001-100,000 ☐ More than100,000			
		☐ 100-1 ☐ 200-9		1 0,001-23,000	Li More tranitot,000			
19.	How much do you	□ \$0 - \$	\$50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		001 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
			,001 - \$500,000 ,001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$	' '	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000 ,001 - \$500,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			,001 - \$500,000 ,001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Par	t 7: Sign Below							
For	you	I have ex	xamined this petition, and I c	declare under penalty of perjury that the inform	nation provided is true and correct.			
				er 7, I am aware that I may proceed, if eligible, e relief available under each chapter, and I ch				
				id not pay or agree to pay someone who is not lithe notice required by 11 U.S.C. § 342(b).	t an attorney to help me fill out this			
		I reques	t relief in accordance with the	e chapter of title 11, United States Code, spec	cified in this petition.			
			tcy case can result in fines u	ent, concealing property, or obtaining money o up to \$250,000, or imprisonment for up to 20 y				
			RIS J KYRIAKOPOULOS	s /s/ RHONDA S K	YRIAKOPOULOS			

Case 2:20-bk-00295-BKM Doc 1. Filed 01/09/20. Entered 01/09/20 15:01:50 Desc Official Form 101 Page 6 07 66

RHONDA S KYRIAKOPOULOS

Executed on January 9, 2020

Signature of Debtor 2

Email Address of Debtor 2

cjk1@live.com

CHRIS J KYRIAKOPOULOS

Executed on January 9, 2020

Signature of Debtor 1

Email Address of Debtor 1

cjk1@live.com

Debtor 1 Debtor 2	CHRIS J KYRIAKO RHONDA S KYRIA		Case number (if known)		
		MM / DD / YYYY	_	MM / DD / YYYŸ	
•	attorney, if you are ted by one	under Chapter 7, 11, 12, or 13 of title 11, United S	States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)	
•	not represented by ey, you do not need s page.	and, in a case in which § 707(b)(4)(D) applies, ce schedules filed with the petition is incorrect.	rtify that I have no know	vledge after an inquiry that the information in the	
	. •	/s/ Haines Meyer	Date	January 9, 2020	
		Signature of Attorney for Debtor		MM / DD / YYYY	
		Haines Meyer Printed name			
		Meyer Law, P.C. Firm name			

Contact phone 480-292-7260 Email address help@arizonabankruptcyhelp.com

20890 AZ

Bar number & State

1425 W. Elliot Rd #105 Gilbert, AZ 85233 Number, Street, City, State & ZIP Code Certificate Number: 15317-AZ-CC-033840319



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>December 16, 2019</u>, at <u>6:38</u> o'clock <u>PM PST</u>, <u>Rhonda S Kyriakopoulos</u> received from <u>Access Counseling</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the <u>District of Arizona</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date:	December 16, 2019	By:	/s/Christel Raz
		Name:	Christel Raz
		Title:	Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

Certificate Number: 15317-AZ-CC-033840289



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>December 16, 2019</u>, at <u>6:34</u> o'clock <u>PM PST</u>, <u>Chris J Kyriakopoulos</u> received from <u>Access Counseling</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the <u>District of Arizona</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date:	December 16, 2019	By:	/s/Christel Raz
		N	Christal Des
		Name:	Christel Raz
		Title:	Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

Fill	in this information to identify your case:			
Deb	otor 1 CHRIS J KYRIAKOPOULOS			
	First Name Middle Name Last Name			
Deb	otor 2 RHONDA S KYRIAKOPOULOS			
(Spot	use if, filing) First Name Middle Name Last Name			
Unit	ted States Bankruptcy Court for the: DISTRICT OF ARIZONA			
Cas	e number			
(if kno				eck if this is an ended filing
	ficial Form 106Sum mmary of Your Assets and Liabilities and Certain Statistical Informat	ion		12/15
Be a infor	is complete and accurate as possible. If two married people are filing together, both are equally response mation. Fill out all of your schedules first; then complete the information on this form. If you are filing a regional forms, you must fill out a new Summary and check the box at the top of this page.	ible for s		ing correct
Part				
			Your	assets
			Value	e of what you own
1.	Schedule A/B: Property (Official Form 106A/B)			
•••	1a. Copy line 55, Total real estate, from Schedule A/B		\$_	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B		\$_	69,161.29
	1c. Copy line 63, Total of all property on Schedule A/B		\$_	69,161.29
Part	2: Summarize Your Liabilities			
				liabilities unt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule	e D	\$_	71,949.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		\$_	5,989.46
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		\$	343,271.00
		_		
	Your total liab	ilities \$		421,209.46
Part	t3: Summarize Your Income and Expenses			
1	Schoolula I: Vour Income (Official Form 1061)			
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		\$_	10,181.31
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J		\$_	9,539.00
Part	4: Answer These Questions for Administrative and Statistical Records			
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court v	vith your c	ther s	schedules.
	■ Yes			

7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1	CHRIS J KYRIAKOPOULOS
Debtor 2	RHONDA S KYRIAKOPOULOS

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$			_

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	5,989.46
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	274,800.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	280,789.46

Fill in this info	rmation to identify your ago	and this filing		
Debtor 1	ormation to identify your case CHRIS J KYRIAKOPO			
DCDIOI 1	First Name	Middle Name Last Name		
Debtor 2	RHONDA S KYRIAKO	POULOS		
(Spouse, if filing)	First Name	Middle Name Last Name		
United States E	Bankruptcy Court for the: DIS	STRICT OF ARIZONA		
Case number				☐ Check if this is an amended filing
_	orm 106A/B l le A/B: Prope r	tv		12/15
	_	ns. List an asset only once. If an asset fits in more than o	ne category, list the asset in	
information. If ma Answer every qu	ore space is needed, attach a se estion.	possible. If two married people are filing together, both a parate sheet to this form. On the top of any additional pagend, or Other Real Estate You Own or Have an Interest In		
1. Do you own o	r have any legal or equitable into	rest in any residence, building, land, or similar property?		
.				
No. Go to P	<u>-</u> .			
☐ Yes. Where	e is the property?			
Part 2: Describ	e Your Vehicles			
	rives. If you lease a vehicle, al	so report it on Schedule G: Executory Contracts and Uvehicles, motorcycles	Inexpired Leases.	
3.1 Make:	CHEVY	Who has an interest in the property? Check one		
J. I Wane.	SILVERADO CREW	- This has an interest in the property: Check one	Do not deduct secured cla the amount of any secure	
Model:	CAB	Debtor 1 only	Creditors Who Have Clair	
Year:	2017	Debtor 2 only	Current value of the	Current value of the
Approxim	ate mileage: 34,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other info	ormation:	At least one of the debtors and another		
	on: 4809 E. MOSSMAN oenix AZ 85054	Check if this is community property (see instructions)	\$27,439.00	\$27,439.00
3.2 Make:	TRIUMPH	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure	
Model:	STREET CUP	Debtor 1 only	Creditors Who Have Clair	
Year:	2017	_ Debtor 2 only	Current value of the	Current value of the
Approxim	ate mileage:	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other info	ormation:	☐ At least one of the debtors and another		
900CC	NDERS, 4-STROKE, on: 4809 E. MOSSMAN	Check if this is community property (see instructions)	\$5,380.00	\$5,380.00
	oenix AZ 85054			

Desc

ebto		HONDA S KYRIAKOPOULOS	OS Ca	ase number (if known)	
3.3	Other inf	HARLEY DAVIDSON FLHTCUL ELECTRA GLIDE ULTRA CL 2015 nate mileage: formation: NDERS, 4-STROKE,	Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	the amount of any secur	claims or exemptions. Put ed claims on Schedule D: nims Secured by Property. Current value of the portion you own?
	Location	on: 4809 E. MOSSMAN loenix AZ 85054	■ Check if this is community property (see instructions)	\$12,400.00	<u>\$12,400.00</u>
3.4	Make: Model:	NISSAN VERSA S SEDAN 4D	Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any secur	claims or exemptions. Put ed claims on Schedule D: nims Secured by Property.
		2016 nate mileage: 45,000 formation:	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		on: 4809 E. MOSSMAN loenix AZ 85054	Check if this is community property (see instructions)	\$4,005.00	\$4,005.00
□ Y		Mor value of the portion you on	we for all of your entries from Bort 2 including on	ny entrine for	
Ad .pa	d the do	have attached for Part 2. Write	vn for all of your entries from Part 2, including ar that number here		\$49,224.00
Ad .pag	d the doges you	have attached for Part 2. Write be Your Personal and Household I	that number here		Current value of the portion you own? Do not deduct secured
Add .pag	Descriiu own cusehold	be Your Personal and Household I or have any legal or equitable in goods and furnishings Major appliances, furniture, linens	that number heretems nterest in any of the following items?		Current value of the portion you own?
Add .pag	Descriiu own cusehold	be Your Personal and Household I or have any legal or equitable in goods and furnishings Major appliances, furniture, linens scribe KITCHEN TABI AND END TAB DESK, VACUU PERSONAL CO	tems Interest in any of the following items? Interest in any of the following items? Interest in any of the following items?	FFEE	Current value of the portion you own? Do not deduct secured
Add .pag	Describe to the dot of	be Your Personal and Household I or have any legal or equitable in goods and furnishings Major appliances, furniture, linens scribe KITCHEN TABI AND END TAB DESK, VACUU PERSONAL COLOcation: 4809	tems Interest in any of the following items? Interest in any of the followin	FFEE STANDS,	Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B

Schedule A/B: Property page 2 Best Case Bankruptcy

	ebtor 1 ebtor 2	CHRIS J KYRIAKOPOULOS RHONDA S KYRIAKOPOULOS	Case number (if known)	
9.		nt for sports and hobbies s: Sports, photographic, exercise, and other hobby equipment; bicycl musical instruments	es, pool tables, golf clubs, skis; canoes and kayaks; carp	pentry tools;
	☐ Yes. □	Describe		
10.	□ No	s es: Pistols, rifles, shotguns, ammunition, and related equipment Describe		
		RUGER 380 LCP Location: 4809 E. MOSSMAN RD, Phoenix	AZ 85054	\$200.00
11.	□ No	es: Everyday clothes, furs, leather coats, designer wear, shoes, acce Describe	ssories	
		MISC CLOTHING Location: 4809 E. MOSSMAN RD, Phoenix	AZ 85054	\$300.00
12.	□ No	es: Everyday jewelry, costume jewelry, engagement rings, wedding r Describe WEDDING BANDS Location: 4809 E. MOSSMAN RD, Phoenix		\$800.00
13.	■ No	m animals es: Dogs, cats, birds, horses Describe		
14.	■ No	er personal and household items you did not already list, includ	ing any health aids you did not list	
15		e dollar value of all of your entries from Part 3, including any en t 3. Write that number here		\$2,400.00
		cribe Your Financial Assets n or have any legal or equitable interest in any of the following?	portion yo Do not dec	alue of the ou own? duct secured exemptions.
16.	■ No	es: Money you have in your wallet, in your home, in a safe deposit bo	x, and on hand when you file your petition	
17.	Example	s of money es: Checking, savings, or other financial accounts; certificates of dep institutions. If you have multiple accounts with the same institutio		er similar
	□ No ■ Yes	Institution name:		

Desc

	17.1.	Checking 9389	CHASE BANK	\$600.00
18. Bonds, mutual <i>Examples:</i> Bond			rage firms, money market accounts	
■ No □ Yes		Institution or issuer nan	ne:	
19. Non-publicly tra	aded stock and	interests in incorporat	ted and unincorporated businesses, including an interest	in an LLC, partnership, and
■ No □ Yes. Give spe		about themne of entity:	% of ownership:	
Negotiable instr	<i>rument</i> s include p	ersonal checks, cashie	ole and non-negotiable instruments rs' checks, promissory notes, and money orders. er to someone by signing or delivering them.	
■ No □ Yes. Give spe		about them uer name:		
21. Retirement or p <i>Examples:</i> Inter □ No			b), thrift savings accounts, or other pension or profit-sharing p	olans
Yes. List each		ely. of account:	Institution name:	
	401(k	x)	ROBERT HALF 401(K)	\$3,369.29
	401K		WELLS FARGO 401K	\$11,368.00
Examples: Agre	II unused deposit	s you have made so that	at you may continue service or use from a company lic utilities (electric, gas, water), telecommunications compani	ies, or others
□ No ■ Yes			Institution name or individual:	
	Renta	al deposit	RENTAL SECURITY DEPOSIT	\$2,200.00
■ No	·	, ,	o you, either for life or for a number of years)	
Yes		e and description.	ified ADI E pressure or under a qualified etate tritien pre-	
26 U.S.C. §§ 530 ■ No	O(b)(1), 529A(b),	and 529(b)(1).	fied ABLE program, or under a qualified state tuition prog	gram.
☐ Yes		·	eparately file the records of any interests.11 U.S.C. § 521(c):	
25. Trusts, equitab ■ No □ Yes. Give spe			r than anything listed in line 1), and rights or powers exe	cisable for your benefit
			other intellectual property from royalties and licensing agreements	
Yes. Give spe	ecific information	about them		

Debtor 1 Debtor 2	CHRIS J KYRIAKOPOULOS RHONDA S KYRIAKOPOULOS	Case number (if known)	
	es, franchises, and other general intangibles oles: Building permits, exclusive licenses, cooperative associati	on holdings, liquor licenses, professional licenses	
	Give specific information about them		
Money or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	unds owed to you Give specific information about them, including whether you all	ready filed the returns and the tax years	
■ No	support oles: Past due or lump sum alimony, spousal support, child sup Give specific information	port, maintenance, divorce settlement, property set	itlement
Examp ■ No	amounts someone owes you bles: Unpaid wages, disability insurance payments, disability be benefits; unpaid loans you made to someone else Give specific information	enefits, sick pay, vacation pay, workers' compensa	tion, Social Security
31. Interes Examp	ts in insurance policies bles: Health, disability, or life insurance; health savings account Name the insurance company of each policy and list its value. Company name:	(HSA); credit, homeowner's, or renter's insurance Beneficiary:	Surrender or refund value:
If you a someo	terest in property that is due you from someone who has done the beneficiary of a living trust, expect proceeds from a life ne has died. Give specific information		property because
<i>Examp</i> ■ No	against third parties, whether or not you have filed a laws bles: Accidents, employment disputes, insurance claims, or right Describe each claim		
■ No	contingent and unliquidated claims of every nature, including Describe each claim	ng counterclaims of the debtor and rights to se	t off claims
■ No	ancial assets you did not already list Give specific information		
	he dollar value of all of your entries from Part 4, including art 4. Write that number here		\$17,537.29
Part 5: De	scribe Any Business-Related Property You Own or Have an Interes	t In. List any real estate in Part 1.	
No. Go		property?	
☐ Yes. G	So to line 38.		

Desc

Debtor 1 Debtor 2 CHRIS J KYRIAKOPOULOS RHONDA S KYRIAKOPOULOS	Case number (if known)	
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interest In.	
46. Do you own or have any legal or equitable interest in any farm-	or commercial fishing-related property?	
■ No. Go to Part 7.		
☐ Yes. Go to line 47.		
Part 7: Describe All Property You Own or Have an Interest in That You	u Did Not List Above	
 53. Do you have other property of any kind you did not already list: Examples: Season tickets, country club membership No ☐ Yes. Give specific information 	?	
54. Add the dollar value of all of your entries from Part 7. Write th	at number here\$0.0)0
Part 8: List the Totals of Each Part of this Form		
55. Part 1: Total real estate, line 2	\$	0.00
56. Part 2: Total vehicles, line 5	\$49,224.00	
57. Part 3: Total personal and household items, line 15	\$2,400.00	
58. Part 4: Total financial assets, line 36	\$17,537.29	
59. Part 5: Total business-related property, line 45	\$0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 54 +	\$0.00	

\$69,161.29

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 6

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$69,161.29

\$69,161.29

Fill in this inform	Ill in this information to identify your case:						
Debtor 1	CHRIS J KYRIAKOPOULOS						
	First Name	Middle Name	Last Name				
Debtor 2	RHONDA S KYRI	AKOPOULOS					
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ban	kruptcy Court for the:	DISTRICT OF ARIZONA					
Case number							
(if known)				☐ Check if this is an amended filing			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Int 1: Identify the Property You Claim as E	Exempt							
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	You are claiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	KITCHEN TABLE AND CHAIRS, LIVING ROOM SOFA, COFFEE AND	\$1,100.00		\$1,100.00	Ariz. Rev. Stat. § 33-1123				
	END TABLES, LAMPS, 3 BEDS, DRESSERS, NIGHT STANDS, DESK, VACUUM CLEANER, BEDDING, TELEVISION, AND PERSONAL COMPUTER. Location: 4809 E. MOSSMAN RD, Phoenix AZ 85054 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit)				
	RUGER 380 LCP	\$200.00		\$200.00	Ariz. Rev. Stat. § 33-1125(10)				
	Location: 4809 E. MOSSMAN RD, Phoenix AZ 85054 Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit					
	MISC CLOTHING Location: 4809 E. MOSSMAN RD,	\$300.00		\$300.00	Ariz. Rev. Stat. § 33-1125(1)				
	Phoenix AZ 85054 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit					
	WEDDING BANDS Location: 4809 E. MOSSMAN RD,	\$800.00		\$800.00	Ariz. Rev. Stat. § 33-1125(4)				
	Phoenix AZ 85054			100% of fair market value, up to					

Official Form 106C

Schedule C: The Property You Claim as Exempt

any applicable statutory limit

page 1 of 2

Line from Schedule A/B: 12.1

Official	Form	106C

No

Yes

	in this inform						
		nation to identify you					
Deb	tor 1	CHRIS J KYRIA First Name	KOPOULOS Middle Name	Last Name		-	
Deh	tor 2	RHONDA S KYF		Lastivanie			
	use if, filing)	First Name	Middle Name	Last Name		-	
Unit	ed States Bar	nkruptcy Court for the	DISTRICT OF ARIZONA			-	
Cas (if kn	e number						c if this is an
	icial Form		s Who Have Claims	Secureo	l by Propert		12/15
Be as is ne numl	s complete and eded, copy the per (if known).	l accurate as possible.	If two married people are filing togeth out, number the entries, and attach it	ner, both are equ	ually responsible for s	upplying correct information	
		•	his form to the court with your other	schedules Yo	ou have nothing else t	to report on this form	
	_		,	corrodation. To	our nave nearing elect		
		all of the information	below.				
		I Secured Claims			Column A	Column B	Column C
for e	ach claim. If me	ore than one creditor has	more than one secured claim, list the cre s a particular claim, list the other creditor cal order according to the creditor's nam	s in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1	Ally Finan	cial	Describe the property that secures	the claim:	\$40,852.00	\$27,439.00	\$13,413.00
	P.o. Box 3		2017 CHEVY SILVERADO C CAB 34,000 miles Location: 4809 E. MOSSMAI Phoenix AZ 85054 As of the date you file, the claim is: apply. Contingent	N RD,			
	Number, Street,	City, State & Zip Code	☐ Unliquidated				
Who	owes the de	bt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
_	Debtor 1 only		An agreement you made (such as	mortgage or sec	ured		
	Debtor 2 only		car loan)				
	Debtor 1 and De		☐ Statutory lien (such as tax lien, me	chanic's lien)			
_		ne debtors and another	Judgment lien from a lawsuit	Durchass N	lonov Coourity		
	Check if this cla community del	aim relates to a bt	■ Other (including a right to offset)	Purchase N	Money Security		
		Opened 06/17 Last					

4343

Active

Date debt was incurred 11/15/19

Last 4 digits of account number

Debte	or 1	CHRIS J I	KYRIAKOPOU	LOS			Case number (if known)			
		First Name	Middle N		Last Name	_	•			
Debto	or 2		S KYRIAKOPO							
		First Name	Middle N	ame	Last Name					
2.2	Esk	o/harley Da	vidson Cr	Describe	the property that secures	the claim:	\$15,567.00	\$12,400.00	\$3,167.00	
	Credi	itor's Name		2015 HA	RLEY DAVIDSON I	LHTCUL	1	<u> </u>		
				_	RA GLIDE ULTRA C					
					IDERS, 4-STROKE, n: 4809 E. MOSSM <i>A</i>					
				I	n: 4609 E. WOSSW <i>F</i> (AZ 85054	IN KD,				
	205	·	ad Driva		date you file, the claim is	: Check all that				
		i0 Arrowhe son City, N		apply.						
-			State & Zip Code	Conting						
	Num	ber, Street, City, a	State & Zip Code	☐ Unliqui☐ Dispute						
Who	owe	s the debt? (Check one.		li en. Check all that apply.					
□ De	ebtor	1 only		_	eement you made (such as	mortgage or	secured			
		2 only		car loa						
■ De	ebtor	1 and Debtor 2	2 only	☐ Statuto	ry lien (such as tax lien, m	echanic's lien))			
☐ At	least	t one of the del	btors and another	☐ Judgm	ent lien from a lawsuit					
■ Cł	neck	if this claim r	elates to a	■ Other (including a right to offset) Purchase Money Security						
C	omm	unity debt								
			Opened							
			11/21/15							
			Last Active			40.4				
Date (debt	was incurred	9/06/19	_ Las	st 4 digits of account nur	nber 431	<u>4</u>			
2.3	Ero	edom Pos	d Financial	Describe	the property that secures	the claim:	\$5,667.00	\$5,380.00	\$287.00	
2.5		itor's Name	u i ilialiciai		NUMPH STREET CL		\$3,007.00	φ3,300.00	φ207.00	
					NDERS, 4-STROKE					
				I	n: 4809 E. MOSSMA					
					AZ 85054					
	106	05 Double	R Blvd	As of the apply.	date you file, the claim is	: Check all that				
	Rer	no, NV 895	21	Conting	gent					
_	Numb	per, Street, City,	State & Zip Code	Unliqui						
				☐ Dispute	ed					
Who	owe	s the debt?	Check one.	Nature of lien. Check all that apply.						
■ De	btor	1 only		☐ An agreement you made (such as mortgage or secured						
☐ De	btor	2 only		car loa	an)					
□ De	ebtor	1 and Debtor 2	2 only	☐ Statuto	ry lien (such as tax lien, m	echanic's lien))			
☐ At	least	t one of the del	btors and another	☐ Judgm	ent lien from a lawsuit					
		if this claim re unity debt	elates to a	Other (including a right to offset)	Purchas	e Money Security			
			Opened							
			11/17 Last							
			A ctivo							

Date debt was incurred 10/18/19

Last 4 digits of account number

9805

Debtor 1	CHRIS J K	YRIAKOPOU	LOS			Case number (if known)		
	First Name	Middle N	ame	Last Name				
Debtor 2	RHONDA	S KYRIAKOP	OULOS					
	First Name	Middle N	ame	Last Name				
2.4 Nis	san Motor	Acceptanc	Describe the	property that secures	the claim:	\$9,863.00	\$4,005.00	\$5,858.00
Cred	itor's Name		2016 NISS	AN VERSA S SEI	DAN 4D			
			45,000 mil	es				
			Location:	4809 E. MOSSMA	N RD,			
			Phoenix A	Z 85054	-			
Pol	b 660366			e you file, the claim is	: Check all that	•		
	las, TX 752	66	apply.					
			Contingen					
Num	ber, Street, City, S	tate & Zip Code	Unliquidate	ed				
\A/I	- 11 1-1-10 0		☐ Disputed	01 1 11 11 1				
_	s the debt? C	heck one.	_	n. Check all that apply.				
☐ Debtor	1 only			nent you made (such as	mortgage or	secured		
Debtor	2 only		car loan)					
☐ Debtor	1 and Debtor 2	only	☐ Statutory li	en (such as tax lien, me	echanic's lien)			
☐ At leas	t one of the deb	otors and another	☐ Judgment	lien from a lawsuit	,			
	Check if this claim relates to a community debt		Other (incl	uding a right to offset)	Purchase	e Money Security		
		Opened						
		3/28/16						
		Last Active			000	•		
Date debt	was incurred	11/15/19	Last 4	digits of account nun	nber 000'	<u> </u>		
Add the	dollar value of	f your entries in C	olumn A on thi	s page. Write that nun	nber here:	\$71,949.0	00	
	the last page at number her	•	the dollar value	e totals from all pages	3.	\$71,949.0	00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Desc

	ation to identify your o	case:					
Debtor 1	CHRIS J KYRIAKO						
D. I. ()	First Name	Middle		me			
Debtor 2 (Spouse if, filing)	RHONDA S KYRIA First Name	AKOPOUL(Middle		me			
				110			
United States Ban	kruptcy Court for the:	DISTRICT	OF ARIZONA				
Case number							
(if known)						☐ Check	cif this is an
						amen	ded filing
Official Form	106E/E						
		/ho Hav	e Unsecured Clain	10			12/15
			reditors with PRIORITY claims			NIDDIODITY III III	
Schedule D: Credito eft. Attach the Cont name and case num	rs Who Have Claims Secuinuation Page to this pag	ured by Prope ge. If you have	Official Form 106G). Do not inc erty. If more space is needed, o e no information to report in a l	opy the Part	t you need, fill it ou	t, number the entries	in the boxes on t
	s have priority unsecured		-				
No. Go to Pa		a ciaiiis agai	nst you i				
— 110. 00 to 1 a	u t Z.						
			has more than one priority unsec				
 List all of your identify what type possible, list the Part 1. If more the 	e of claim it is. If a claim ha claims in alphabetical orde nan one creditor holds a pa	as both priority er according to articular claim,	has more than one priority unsect and nonpriority amounts, list that the creditor's name. If you have list the other creditors in Part 3. tions for this form in the instruction	claim here a more than tw	and show both priority	and nonpriority amour	nts. As much as
2. List all of your identify what type possible, list the Part 1. If more the (For an explanate)	e of claim it is. If a claim ha claims in alphabetical orde nan one creditor holds a pa	as both priority er according to articular claim, see the instruct	and nonpriority amounts, list that the creditor's name. If you have list the other creditors in Part 3.	claim here a more than tw n booklet.)	and show both priority to priority unsecured	v and nonpriority amount claims, fill out the Content Priority amount	nts. As much as inuation Page of Nonpriority amount
2. List all of your identify what type possible, list the Part 1. If more the (For an explanate priority Create All of the Part 1. In the Part 1. If the Part 1. If more 1. If mor	e of claim it is. If a claim ha claims in alphabetical orde nan one creditor holds a pation of each type of claim, s AL REVENUE SERV ditor's Name	as both priority er according to articular claim, see the instruct	and nonpriority amounts, list that the creditor's name. If you have list the other creditors in Part 3. tions for this form in the instruction. Last 4 digits of account numbers.	claim here a more than two hooklet.)	nd show both priority o priority unsecured Total claim	v and nonpriority amount claims, fill out the Content Priority amount	nts. As much as inuation Page of Nonpriority amount
2. List all of your identify what type possible, list the Part 1. If more the (For an explanate priority Creens PO BOX	e of claim it is. If a claim ha claims in alphabetical orde han one creditor holds a partion of each type of claim, s AL REVENUE SERV ditor's Name 7346	as both priority er according to articular claim, see the instruct	and nonpriority amounts, list that the creditor's name. If you have list the other creditors in Part 3. tions for this form in the instruction	claim here a more than tw n booklet.)	nd show both priority o priority unsecured Total claim	v and nonpriority amount claims, fill out the Content Priority amount	nts. As much as inuation Page of Nonpriority amount
2. List all of your identify what type possible, list the Part 1. If more the (For an explanate priority Creens Po Box Philadel)	e of claim it is. If a claim ha claims in alphabetical orde nan one creditor holds a pation of each type of claim, s AL REVENUE SERV ditor's Name	as both priority er according to articular claim, see the instruct	and nonpriority amounts, list that the creditor's name. If you have list the other creditors in Part 3. tions for this form in the instruction. Last 4 digits of account numbers.	claim here a more than two hooklet.) The state of the st	nd show both priority o priority unsecured Total claim \$5,989.4	v and nonpriority amount claims, fill out the Content Priority amount	nts. As much as inuation Page of Nonpriority amount
2. List all of your identify what type possible, list the Part 1. If more the (For an explanate 2.1) INTERNATION Priority Creepo Box Philadel Number Str	e of claim it is. If a claim ha claims in alphabetical orde han one creditor holds a partion of each type of claim, s AL REVENUE SERV ditor's Name 7346 phia, PA 19101-7346	as both priority er according to articular claim, see the instruct	and nonpriority amounts, list that the creditor's name. If you have list the other creditors in Part 3. tions for this form in the instruction. Last 4 digits of account number. When was the debt incurred?	claim here a more than two hooklet.) The state of the st	nd show both priority o priority unsecured Total claim \$5,989.4	v and nonpriority amount claims, fill out the Content Priority amount	nts. As much as inuation Page of Nonpriority amount
2. List all of your identify what type possible, list the Part 1. If more the (For an explanate 2.1) INTERNATION Priority Creepo Box Philadel Number Str	e of claim it is. If a claim ha claims in alphabetical orden none creditor holds a partion of each type of claim, s AL REVENUE SERV ditor's Name 7346 phia, PA 19101-7346 reet City State Zip Code the debt? Check one.	as both priority er according to articular claim, see the instruct	and nonpriority amounts, list that the creditor's name. If you have list the other creditors in Part 3. tions for this form in the instruction. Last 4 digits of account number. When was the debt incurred? As of the date you file, the claim	claim here a more than two hooklet.) The state of the st	nd show both priority o priority unsecured Total claim \$5,989.4	v and nonpriority amount claims, fill out the Content Priority amount	nts. As much as inuation Page of Nonpriority amount
2. List all of your identify what type possible, list the Part 1. If more the (For an explanate) 2.1 INTERNATION Priority Creepo Box Philadel Number Strumber Who incurred	e of claim it is. If a claim ha claims in alphabetical orde han one creditor holds a partion of each type of claim, s AL REVENUE SERV ditor's Name 7346 phia, PA 19101-7346 eet City State Zip Code the debt? Check one.	as both priority er according to articular claim, see the instruct	and nonpriority amounts, list that the creditor's name. If you have list the other creditors in Part 3. tions for this form in the instruction. Last 4 digits of account number. When was the debt incurred? As of the date you file, the claim	claim here a more than two hooklet.) The state of the st	nd show both priority o priority unsecured Total claim \$5,989.4	v and nonpriority amount claims, fill out the Content Priority amount	nts. As much as inuation Page of Nonpriority amount
2. List all of your identify what type possible, list the Part 1. If more the (For an explanate) 2.1 INTERNATION Priority Creens PO BOX Philadel Number Structured Debtor 1 or Debtor 2 o	e of claim it is. If a claim ha claims in alphabetical order nan one creditor holds a partion of each type of claim, so the control of claim, so the control of the control of the control of claim, so the control of claim, so the control of cont	as both priority er according to articular claim, see the instruct	and nonpriority amounts, list that the creditor's name. If you have list the other creditors in Part 3. tions for this form in the instruction. Last 4 digits of account number. When was the debt incurred? As of the date you file, the claim	r claim here a more than two n booklet.) r 2017 n is: Check a	nd show both priority o priority unsecured Total claim \$5,989.4	v and nonpriority amount claims, fill out the Content Priority amount	nts. As much as inuation Page of Nonpriority amount
2. List all of your identify what type possible, list the Part 1. If more the (For an explanate) 2.1 INTERN/Priority Cree PO BOX Philadel Number Str Who incurred Debtor 1 or Debtor 2 or Debtor 1 ar	e of claim it is. If a claim ha claims in alphabetical orde han one creditor holds a partion of each type of claim, s AL REVENUE SERV ditor's Name 7346 phia, PA 19101-7346 et City State Zip Code the debt? Check one.	as both priority er according to articular claim, see the instruct	and nonpriority amounts, list that the creditor's name. If you have list the other creditors in Part 3. tions for this form in the instruction. Last 4 digits of account number. When was the debt incurred? As of the date you file, the claim Contingent. Unliquidated. Disputed. Type of PRIORITY unsecured of	r claim here a more than two n booklet.) r 2017 n is: Check a	nd show both priority o priority unsecured Total claim \$5,989.4	v and nonpriority amount claims, fill out the Content Priority amount	nts. As much as inuation Page of Nonpriority amount
2. List all of your identify what type possible, list the Part 1. If more the (For an explanate) 2.1 INTERN/Priority Cree PO BOX Philadel Number Str Who incurred Debtor 1 or Debtor 2 or Debtor 1 ar	e of claim it is. If a claim ha claims in alphabetical order nan one creditor holds a partion of each type of claim, so the control of claim, so the control of the control of the control of claim, so the control of claim, so the control of cont	as both priority er according to articular claim, see the instruct	and nonpriority amounts, list that the creditor's name. If you have list the other creditors in Part 3. tions for this form in the instruction. Last 4 digits of account number. When was the debt incurred? As of the date you file, the claim Contingent. Unliquidated. Disputed. Type of PRIORITY unsecured of Domestic support obligations.	a claim here a more than two n booklet.) The state of th	Total claim \$5,989.4 all that apply	v and nonpriority amount claims, fill out the Content Priority amount	nts. As much as inuation Page of Nonpriority amount
2. List all of your identify what type possible, list the Part 1. If more the (For an explanate) 2.1 INTERNATION Priority Cree PO BOX Philadel Number Street Who incurred Debtor 1 or Debtor 2 or Debtor 1 ar At least one	e of claim it is. If a claim ha claims in alphabetical orde han one creditor holds a partion of each type of claim, s AL REVENUE SERV ditor's Name 7346 phia, PA 19101-7346 et City State Zip Code the debt? Check one.	as both priority er according to articular claim, see the instruct //ICE 6	and nonpriority amounts, list that the creditor's name. If you have list the other creditors in Part 3. tions for this form in the instruction. Last 4 digits of account number. When was the debt incurred? As of the date you file, the claim Contingent. Unliquidated. Disputed. Type of PRIORITY unsecured of Domestic support obligations. Taxes and certain other debts.	r (laim here a more than two no booklet.) r 2017 n is: Check a laim:	Total claim \$5,989.4 all that apply government	v and nonpriority amount claims, fill out the Content Priority amount	nts. As much as inuation Page of Nonpriority amount
2. List all of your identify what type possible, list the Part 1. If more the (For an explanate 2.1) INTERNATION Priority Cree PO BOX Philadel Number Str Who incurred Debtor 1 or Debtor 2 or Debtor 1 ar At least one Check if the Is the claim su	e of claim it is. If a claim ha claims in alphabetical order an one creditor holds a partion of each type of claim, so the claim of each type of the claim of claim o	as both priority er according to articular claim, see the instruct	and nonpriority amounts, list that the creditor's name. If you have list the other creditors in Part 3. tions for this form in the instruction. Last 4 digits of account number. When was the debt incurred? As of the date you file, the claim Contingent. Unliquidated. Disputed. Type of PRIORITY unsecured of Domestic support obligations. Taxes and certain other debts. Claims for death or personal in the credit of the contingent.	r (laim here a more than two no booklet.) r 2017 n is: Check a laim:	Total claim \$5,989.4 all that apply government	v and nonpriority amount claims, fill out the Content Priority amount	nts. As much as inuation Page of Nonpriority amount
2. List all of your identify what type possible, list the Part 1. If more the (For an explanate) 2.1 INTERNATION Priority Cree PO BOX Philadel Number Str Who incurred Debtor 1 or Debtor 2 or Debtor 1 ar At least one Check if the	e of claim it is. If a claim ha claims in alphabetical order an one creditor holds a partion of each type of claim, so the control of the con	as both priority er according to articular claim, see the instruct	and nonpriority amounts, list that the creditor's name. If you have list the other creditors in Part 3. tions for this form in the instruction. Last 4 digits of account number. When was the debt incurred? As of the date you file, the claim Contingent. Unliquidated. Disputed. Type of PRIORITY unsecured of Domestic support obligations. Taxes and certain other debts.	a claim here a more than two no booklet.) The second of the claim is: Check a laim: I you owe the njury while you	Total claim \$5,989.4 all that apply government	v and nonpriority amount claims, fill out the Content Priority amount	nts. As much as inuation Page of Nonpriority amount

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Schedule E/F: Creditors Who Have Unsecured Claims

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Total claim

Debtor 1	CHRIS J KYRIAKOPOULOS
Debtor 2	RHONDA S KYRIAKOPOULOS

Case number (if known)

4.1	Cap1/cabelas	Last 4 digits of account number	8478	\$2,707.00
	Nonpriority Creditor's Name 4800 Nw 1st Street Lincoln, NE 68521	When was the debt incurred?	Opened 09/15 Last Active 9/06/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans —		
	debt Is the claim subject to offset? ■	☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin	ration agreement or divorce that you did not	
	■ No □ Yes	Other. Specify Credit Card		
4.2	Capital One Bank Usa N Nonpriority Creditor's Name	Last 4 digits of account number	9986	\$11,269.00
	Po Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	Opened 08/07 Last Active 8/22/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	Debts to pension or profit-sharin		
	☐ Yes	Other. Specify Credit Card		
4.3	Capital One Bank Usa N Nonpriority Creditor's Name	Last 4 digits of account number	3687	\$9,353.00
	Po Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	Opened 05/15 Last Active 8/23/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim: ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Carc		

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Schedule E/F: Creditors Who Have Unsecured Claims

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CHRIS J KYRIAKOPOULOS RHONDA S KYRIAKOPOULOS	Case number (if known)

4.4	Capital One Bank Usa N	Last 4 digits of account number	6800	\$5,457.00
	Nonpriority Creditor's Name Po Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	Opened 01/02 Last Active 8/23/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim		
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify Credit Card	<u> </u>	
4.5	Citicards Cbna	Last 4 digits of account number	0079	\$6,012.00
	Nonpriority Creditor's Name Po Box 6217 Sioux Falls, SD 57117	When was the debt incurred?	Opened 08/15 Last Active 10/08/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	and an and athern similar dalate	
	No	☐ Debts to pension or profit-sharin		
	☐ Yes	Other. Specify Credit Card	<u> </u>	
4.6	Citicards Cbna Nonpriority Creditor's Name	Last 4 digits of account number	5747	\$4,639.00
	Po Box 6217 Sioux Falls, SD 57117	When was the debt incurred?	Opened 05/16 Last Active 8/22/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
		·		
	□ Yes	Other. Specify Credit Card	<u> </u>	

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Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1	CHRIS J KYRIAKOPOULOS
Debtor 2	RHONDA S KYRIAKOPOULOS

Case number (if known)

4.7	Comenitybank/ny&co	Last 4 digits of account number	7529	\$1,063.00
	Nonpriority Creditor's Name		Opened 12/15 Last Active	
	Po Box 182789 Columbus, OH 43218	When was the debt incurred?	8/10/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.8	Dept Of Education/neln Nonpriority Creditor's Name	Last 4 digits of account number	3487	\$148,301.00
	Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 06/17 Last Active 11/30/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
			SUMER DEBT- STUDENT LOAN FOR TUITION)	
4.9	Dept Of Education/neln Nonpriority Creditor's Name	Last 4 digits of account number	2407	\$84,736.00
	Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 02/17 Last Active 10/18/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	☐ Yes	Other. Specify		
		NON-CONS	SUMER DEBT- STUDENT LOAN FOR TUITION)	

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Schedule E/F: Creditors Who Have Unsecured Claims

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Debto Debto	or 1 CHRIS J KYRIAKOPOULOS Or 2 RHONDA S KYRIAKOPOULOS		Case number (if known)			
4.1 0	Dept Of Education/neln Nonpriority Creditor's Name	Last 4 digits of account number	3387	\$24,875.00		
	Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 06/17 Last Active 11/30/19			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify				
			SUMER DEBT- STUDENT LOAN FOR TUITION)			
4.1 1	Dept Of Education/neln	Last 4 digits of account number	2307	\$16,888.00		
	Nonpriority Creditor's Name Po Box 82561	When was the debt incurred?	Opened 02/17 Last Active 10/18/19			
	Lincoln, NE 68501 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.	As of the date you me, the olding	3. Oncor an that apply			
	Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐Yes	Other. Specify				
		NON-CONS	SUMER DEBT- STUDENT LOAN FOR TUITION)			
4.1	Discover Fin Svcs Llc	Last 4 digits of account number	0489	\$3,923.00		
	Nonpriority Creditor's Name Pob 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 06/15 Last Active 9/22/19			
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	\square Check if this claim is for a community debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				

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■ No ☐ Yes

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Other. Specify Credit Card

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

CHRIS J KYRIAKOPOULOS RHONDA S KYRIAKOPOULOS	Case number (if known)	

4.1 3	HONOR HEALTH	Last 4 digits of account number		\$5,631.00
	Nonpriority Creditor's Name PO BOX 845633	When was the debt incurred?		
	Los Angeles, CA 90084 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify MEDICAL E	BILL	
4.1 4	INTERNAL REVENUE SERVICE Nonpriority Creditor's Name	Last 4 digits of account number		\$12,212.00
	PO BOX 7346	When was the debt incurred?	2015	
	Philadelphia, PA 19101-7346 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify 2015 PERS		
4.1 5	Jpmcb Card	Last 4 digits of account number	7979	\$591.00
	Nonpriority Creditor's Name		Opened 01/18 Last Active	
	Po Box 15369 Wilmington, DE 19850	When was the debt incurred?	9/28/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	☐ Debts to pension or profit-sharin		
	☐ Yes	■ Other Specify Credit Card	1	
	55	- Other. Specify	<u>- </u>	

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Debtor 1 CHRIS J KYRIAKOPOULOS Debtor 2 RHONDA S KYRIAKOPOULOS Case number (if known) 4.1 SOUTHWEST DIAGNOSITC \$1.957.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 2323 W. ROSE GARDEN LANE When was the debt incurred? Phoenix, AZ 85027 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify MEDICAL BILL 4.1 SPECTRUM DERMATOLOGY \$193.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 844492 When was the debt incurred? Los Angeles, CA 90084 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

Syncb/sams Club 1825 Last 4 digits of account number Nonpriority Creditor's Name Opened 07/17 Last Active Po Box 965005 When was the debt incurred? 10/06/19 Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

■ Other. Specify MEDICAL BILL

☐ Yes

4.1

8

\$755.00

Debtor 1 Debtor 2		KYRIAKOPOULOS S KYRIAKOPOULOS		Case nu	mber (if known)			
4.1	Td Bank Us	sa/targetcred	Last 4 digits of account number	8802		\$1,587.00		
	Nonpriority Cre	ditor's Name		_	100/45 1 1 1			
	Po Box 673 Minneapoli	3 s, MN 55440	When was the debt incurred?	8/10/1	ed 08/15 Last Active 19	_		
	Number Street City State Zip Code Who incurred the debt? Check one.		As of the date you file, the claim	is: Check	all that apply			
	Debtor 1 on	ıly	☐ Contingent					
	■ Debtor 2 on	ıly	☐ Unliquidated					
	Debtor 1 an	nd Debtor 2 only	□ Disputed					
	_	of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if th	is claim is for a community	☐ Student loans					
	debt	ubject to offset?	Obligations arising out of a separeport as priority claims	aration ag	reement or divorce that you did not			
	No		☐ Debts to pension or profit-sharing	ng plans, a	and other similar debts			
	☐ Yes		Other. Specify Credit Card	t		_		
U	Us Bank		Last 4 digits of account number	6526		\$1,122.00		
	Nonpriority Cre	ditor's Name		Onon	and 11/15 I not Antivo			
	Cb Dispute Saint Louis	es s, MO 63166	When was the debt incurred?	9/06/1	ed 11/15 Last Active 19	_		
	Number Street City State Zip Code		As of the date you file, the claim is: Check all that apply					
	_	the debt? Check one.						
	Debtor 1 on	nly	☐ Contingent					
	Debtor 2 on	nly	☐ Unliquidated					
	Debtor 1 and Debtor 2 only		☐ Disputed					
	☐ At least one of the debtors and another		Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community		Student loans					
	debt Is the claim su	ubject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No		Debts to pension or profit-sharing	ng plans, a	and other similar debts			
	☐ Yes		Other. Specify Credit Card	t		_		
is tryin have m notified	s page only if g to collect fro nore than one of d for any debts	om you for a debt you owe to som creditor for any of the debts that s in Parts 1 or 2, do not fill out or	out your bankruptcy, for a debt that y leone else, list the original creditor in you listed in Parts 1 or 2, list the add submit this page.	Parts 1	or 2, then list the collection agend	y here. Similarly, if you		
Part 4:		mounts for Each Type of Uns						
	he amounts of unsecured cla		s. This information is for statistical r	eporting		ld the amounts for each		
	6a.	Domestic support obligations		6a.	Total Claim			
Total	ua.	Domestic support obligations		ua.	\$0.00	<u>-</u>		
claims	4.4	0. 7		6h	¢ 5000.40			
from Par	t 1 6b. 6c.	•	ou owe the government jury while you were intoxicated	6b. 6c.	\$ 5,989.46 \$ 0.00			
	6d.	· ·	cured claims. Write that amount here.	6d.	\$ <u>0.00</u> \$ 0.00			
	54.	and the second s						
	6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$ 5,989.46	;		

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Total claims

Schedule E/F: Creditors Who Have Unsecured Claims

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6f. Student loans

Total Claim

274,800.00

6f.

Debtor 1 CHRIS J KYRIAKOPOULOS Debtor 2 RHONDA S KYRIAKOPOULOS

Case number (if known)

from	Part 2

- 6g. Obligations arising out of a separation agreement or divorce that
- you did not report as priority claims

 Debts to pension or profit-sharing plans, and other similar debts
- Other. Add all other nonpriority unsecured claims. Write that amount 6i.
- Total Nonpriority. Add lines 6f through 6i.

6g.	\$ 0.00
6h.	\$ 0.00
6i.	\$ 68,471.00

Desc

Fill in this information to identify your case:									
Debtor 1	CHRIS J KYRIAK								
	First Name	Middle Name	Last Name						
Debtor 2	RHONDA S KYRI	AKOPOULOS							
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Ban	kruptcy Court for the:	DISTRICT OF ARIZONA							
Case number									
(if known)				☐ Check if this is an					
				amended filing					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 TRACI MENDEZ 8008 N 18TH PLACE Phoenix, AZ 85020 **RESIDENTIAL LEASE, \$2150.00 MONTHLY RENT**

Fill in this info	ormation to identify your	case:			
Debtor 1	CHRIS J KYRIAK				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2	RHONDA S KYRI	AKOPOULOS			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	DISTRICT OF ARIZONA			
Case number					
(if known)				☐ Check if this is an	
				amended filing	
	orm 106H				
Schedul	e H: Your Cod	ebtors		12/15	
people are filing it out, and report out, and report out, and report out out, and report out out out, and report out out, and report out, and	g together, both are equi number the entries in the I case number (if known)	ally responsible for supplyir	ng correct informat e Additional Page t	as complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Pag to this page. On the top of any Additional Pages, write as a codebtor.) ,
■ No					
☐ Yes					
		lived in a community prope Nevada, New Mexico, Puerto		ry? (Community property states and territories include ington, and Wisconsin.)	
□ No. Go	to line 3				
_		ıse, or legal equivalent live wi	th you at the time?		
		ioo, or rogal oquiralont iiro iii	,		
■ Y	es.				
	In which community state	e or territory did you live?	-NONE-	. Fill in the name and current address of that person.	
	Name of your spouse, former spo Number, Street, City, State & Zip				
in line 2 a Form 106l out Colum	n 1, list all of your codebt gain as a codebtor only i D), Schedule E/F (Official	ors. Do not include your spo f that person is a guarantor Form 106E/F), or Schedule	or cosigner. Make	r if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offic D6G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the deb Check all schedules that apply:	ial fill
3.1 Name	<u> </u>			☐ Schedule D, line	
· ·	•			☐ Schedule E/F, line	
				☐ Schedule G, line	
Numb City	per Street	State	ZIP Code		
3.2				Schedule D, line	_
Name				☐ Schedule E/F, line	
				☐ Schedule G, line	
Numb	per Street	State	ZID Code	_	
City		State	ZIP Code		

Schedule H: Your Codebtors

Fill	in this information to identify you	· case·		
	, ,	YRIAKOPOULOS		
	otor 2 RHONDA use, if filing)	S KYRIAKOPOULOS		
Uni	ted States Bankruptcy Court for t	he: DISTRICT OF ARIZO	NA	
	se number own)		-	Check if this is: An amended filing A supplement showing postpetition chapter
	fficial Form 106l chedule I: Your Inc			13 income as of the following date: MM / DD/ YYYY
sup _l spo atta	olying correct information. If yourse. If you are separated and y	ou are married and not filit our spouse is not filing w n. On the top of any additi	ng jointly, and your spouse is living ith you, do not include information	nd Debtor 2), both are equally responsible for g with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every question.
1.	Fill in your employment information.	•	Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with	Employment status	■ Employed □ Not employed	■ Employed
	information about additional employers. Include part-time, seasonal, or	Occupation	NATIONAL CREDIT RISK MANAGER	ACCOUNTS RECEIVABLE MANAGER
	self-employed work. Occupation may include studer or homemaker, if it applies.	t Employer's name	ROBERT HALF INTERNATIONAL INC	BEST WESTERN
	ог пошетнакег, и и арриеs.	Employer's address	2375 E CAMELBACK ROAD SUITE 290	6201 N 24TH PARKWAY Phoenix, AZ 85016

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

How long employed there?

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2 YEARS

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 7,955.24 7,813.80 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 7,955.24 7,813.80

1.5 YEARS

				For	Debtor 1		Debtor 2 or -filing spouse	
	Copy	r line 4 here	4.	\$	7,955.24	\$	7,813.80	
				-	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· —	1,01010	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,829.69	\$	2,350.96	
	5b.	Mandatory contributions for retirement plans	5b.	\$	62.14	\$	233.11	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$_	312.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	734.98	\$	64.85	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	_5h.+	\$	0.00	\$	0.00	
6.	Add 1	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	2,626.81	\$	2,960.92	
7.	Calcu	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	5,328.43	\$	4,852.88	
8.	List a	all other income regularly received:						
	8a.	Net income from rental property and from operating a business,						
		profession, or farm Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent						
		regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce	0 -	Φ.	0.00	Φ.	0.00	
	0.1	settlement, and property settlement.	8c.	\$	0.00	\$_	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$_	0.00	
	8e.	Social Security	8e.	\$	0.00	\$_	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance						
		that you receive, such as food stamps (benefits under the Supplemental						
		Nutrition Assistance Program) or housing subsidies.						
		Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	_ 8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	\$	0.00	
						$\overline{}$		
9.	Add a	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.	Calcu	ulate monthly income. Add line 7 + line 9.	0. \$	Ę	5,328.43 + \$	4.8	352.88 = \$ 10,181	.31
		he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	· · -		-	,-	10,10	
4.4			, <u> </u>					
11.		e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your of		lante	vour roommates	and		
		friends or relatives.	асренс	iciito,	your roommates	and		
		ot include any amounts already included in lines 2-10 or amounts that are not a	vailabl	e to p	ay expenses liste	d in S	Schedule J.	
	Speci	ify:			•		11. +\$ (0.00
								\equiv
12.		the amount in the last column of line 10 to the amount in line 11. The resu						
		that amount on the Summary of Schedules and Statistical Summary of Certain	1 Liabii	ities a	nd Related <i>Data,</i>	IT IT	12. \$ 10,181	.31
	applie							
							Combined	
12	Do v	ou expect an increase or decrease within the year after you file this form?	,				monthly incor	пе
١٥.	DO yo	•						
		No.						
		Yes. Explain:						

	in this inform	ation to identify yo	our case:							
	tor 1			NIII OS		Check	if this is:			
	CHRIS J KYRIAKOPOULOS					☐ An amended filing				
	Debtor 2 RHONDA S KYRIAKOPOULOS (Spouse, if filing)						A supplement showing postpetition chapter 13 expenses as of the following date:			
Unit	ed States Bank	ruptcy Court for the	: DISTRI	CT OF ARIZONA		N	MM / DD / YYYY			
	e number nown)									
		orm 106J								
Be info	as complete ormation. If n		s possible eded, atta	. If two married people and the control of the cont						
Par 1.	t 1: Desc Is this a joi	ribe Your House	ehold							
١.	□ No. Go t		in a senar	ate household?						
	= N	10	-	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Debto	or 2.			
2.	Do you hav	e dependents?	□ No							
	Do not list Debtor 2.	Debtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?		
	Do not state dependents				Son		18	□ No ■ Yes □ No □ Yes □ No □ Yes		
								□ No □ Yes		
3.	expenses of	penses include of people other t od your depende	han $_{\square}$	No Yes						
exp	imate your e	a date after the	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp						
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> Y			Your expe	enses		
4.		or home owners nd any rent for th		ses for your residence. I	nclude first mortgage	e 4. \$		2,150.00		
	If not inclu	ded in line 4:								
	4a. Real	estate taxes				4a. \$		0.00		
	4b. Prope	erty, homeowner's				4b. \$		0.00		
				upkeep expenses		4c. \$		0.00		
5.		eowner's associat mortgage paym		dominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00		
		3 · 3 · P · · · · ·	, ,	, 500 05 110	, ,			<u> </u>		

Official Form 106J

	btor 1 CHRIS J KYRIAKOPOULOS btor 2 RHONDA S KYRIAKOPOULOS	Case number (if known)	
6.	Utilities:		
0.	6a. Electricity, heat, natural gas	6a. \$	350.00
	6b. Water, sewer, garbage collection	6b. \$	125.00
	6c. Telephone, cell phone, Internet, satellite, and cable service	ces 6c. \$	360.00
	6d. Other. Specify:	6d. \$	0.00
7.	Food and housekeeping supplies	7. \$	600.00
8.	Childcare and children's education costs	8. \$	0.00
9.		9. \$	240.00
10.	Personal care products and services	10. \$	100.00
	Medical and dental expenses	11. \$	150.00
	Transportation. Include gas, maintenance, bus or train fare.		
	Do not include car payments.	12. \$	680.00
13.	Entertainment, clubs, recreation, newspapers, magazines,	and books 13. \$	225.00
14.	Charitable contributions and religious donations	14. \$	0.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in		
	15a. Life insurance	15a. \$	0.00
	15b. Health insurance	15b. \$	0.00
	15c. Vehicle insurance	15c. \$	580.00
	15d. Other insurance. Specify:	15d. \$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included		
4-	Specify:	16. \$	0.00
17.	Installment or lease payments:	17a. \$	000.00
	17a. Car payments for Vehicle 1	17a. \$	860.00
	17b. Car payments for Vehicle 2		330.00
	17c. Other Specify: STUDENT LOAN	17c. \$ F	1,500.00
	17d. Other. Specify: IRS INSTALLMENT AGREEMENT		300.00
	MOTORCYCLE LOAN - HARLEY DAVIDSON	\$	499.00
40	MOTORCYCLE LOAN - TRIUMPH	\$	199.00
18.	Your payments of alimony, maintenance, and support that deducted from your pay on line 5, Schedule I, Your Income		0.00
19	Other payments you make to support others who do not liv		0.00
10.	Specify:	19.	0.00
20.	Other real property expenses not included in lines 4 or 5 of		
	20a. Mortgages on other property	20a. \$	0.00
	20b. Real estate taxes	20b. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e. Homeowner's association or condominium dues	20e. \$	0.00
21.	Other: Specify: MISC	21. +\$	250.00
	ADT SECURITY	+\$	41.00
	ADI GEOGRITI		71.00
22.	Calculate your monthly expenses		
	22a. Add lines 4 through 21.	\$	9,539.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23c. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. \$ 642.31

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

	No.
--	-----

☐ Yes. Explain here:

Fill in this inform	nation to identify your			
FIII III UIIS IIIIOIII	nation to identify your	case.		
Debtor 1	CHRIS J KYRIAK			_
	First Name	Middle Name	Last Name	
Debtor 2	RHONDA S KYRI			_
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	DISTRICT OF ARIZON	NA	_
Case number				
(if known)				☐ Check if this is an amended filing
Official Form				
Declarat	ion About a	ın Individua	I Debtor's Schedule	S 12/15
, ,	3 U.S.C. §§ 152, 1341, 1 ı Below	519, and 3571.		
Did you pay	or agree to pay some	one who is NOT an atto	orney to help you fill out bankruptcy for	ms?
■ No				
☐ Yes. N	lame of person			ch Bankruptcy Petition Preparer's Notice, aration, and Signature (Official Form 119)
	ty of perjury, I declare true and correct.	that I have read the sur	nmary and schedules filed with this dec	claration and
X /s/ CHR	RIS J KYRIAKOPOUL	os	X /s/ RHONDA S KYRIAK	OPOULOS
	J KYRIAKOPOULOS		RHONDA S KYRIAKOP	
	e of Debtor 1	-	Signature of Debtor 2	
Date .J	lanuary 9, 2020		Date January 9, 2020	
			<u> </u>	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in this inf				l
	ormation to identify your			
Debtor 1	CHRIS J KYRIAK	OPOULOS Middle Name	Last Name	
Debtor 2	RHONDA S KYRI	AKOPOULOS		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	DISTRICT OF ARIZONA		
Case number (if known)				☐ Check if this is an amended filing
Be as complet	nt of Financial A	le. If two married people are fi	als Filing for Bankruptc	sible for supplying correct
number (if kno	own). Answer every quest		form. On the top of any additional pag	jes, write your name and case
	our current marital status		eu belole	
■ Marri	ied narried			
2. During th	e last 3 years, have you li	ved anywhere other than wher	re you live now?	
□ No				
	List all of the places you liv	red in the last 3 years. Do not inc	lude where you live now.	
	, ,	,	·	
Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Address:	Dates Debtor 2 lived there
	l 77TH PLACE ale, AZ 85255	From-To: 12/28/2014 TO 05/18/2018	■ Same as Debtor 1	Same as Debtor 1 From-To:
UNIT 22	I HAYDEN ROAD 59 ale, AZ 85260	From-To: 05/18/2018 TO 05/17/2019	Same as Debtor 1	■ Same as Debtor 1 From-To:
			quivalent in a community property sta , New Mexico, Puerto Rico, Texas, Wash	
_	Make sure you fill out Sche	edule H: Your Codebtors (Official	Form 106H).	
Dort 2	vision the Carress of Verry	Incomo	,	
Part 2 Exp	plain the Sources of Your	income		
Fill in the t	total amount of income you	received from all jobs and all bu	business during this year or the two p sinesses, including part-time activities. ether, list it only once under Debtor 1.	revious calendar years?
□ No ■ Yes.	Fill in the details.			
. 00.		Dahtan 4	Daller 2	
		Debtor 1	Debtor 2	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

					Debtor 1				Debtor 2		
					Sources of income Check all that apply.	(bef	ss income ore deductions and usions)	i	Sources of inc Check all that a		Gross income (before deductions and exclusions)
			/ 1 of currer filed for ban		■ Wages, commissions, bonuses, tips		\$0.00		■ Wages, combonuses, tips	missions,	\$0.00
					☐ Operating a business				☐ Operating a	business	
Fo (Ja	r last anuar	calen y 1 to	dar year: December :	31, 2019)	■ Wages, commissions, bonuses, tips		\$107,460.69	9	■ Wages, combonuses, tips	missions,	\$98,600.00
					☐ Operating a business				☐ Operating a	business	
			dar year bef December :		■ Wages, commissions, bonuses, tips		\$96,589.16		■ Wages, combonuses, tips	missions,	\$98,411.79
					☐ Operating a business				☐ Operating a	business	
	winr	nings. each s No	If you are fili	ng a joint cas	pensions; rental income; in e and you have income that me from each source sepa	at you rec	eived together, list	it onl	y once under De	ebtor 1.	a gambing and lottery
					Debtor 1				Debtor 2		
					Sources of income Describe below.	eacl (bef	ss income from h source ore deductions and usions)	i	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3:	List	Certain Pa	yments You	Made Before You Filed fo	r Bankru	ıptcy				
6.	Are	eithei	Debtor 1's	or Debtor 2'	s debts primarily consun	ner debts	?				
		No.	Neither De	btor 1 nor D	ebtor 2 has primarily con personal, family, or housel	sumer de	ebts. Consumer de	ebts a	are defined in 11	U.S.C. § 10 ⁻	1(8) as "incurred by an
			•	90 days befo	re you filed for bankruptcy,	did you p	ay any creditor a to	otal o	of \$6,825* or mo	re?	
				Go to line 7							
			Yes* Subject t	paid that cre not include	each creditor to whom you peditor. Do not include payments to an attorney for on 4/01/22 and every 3 years.	ents for d r this banl	lomestic support ob kruptcy case.	oligat	ions, such as ch	ild support a	nd alimony. Also, do
		Yes	•	•	r both have primarily con					•	
	_	100.			re you filed for bankruptcy,			otal o	of \$600 or more?		
			□ No.	Go to line 7							
			☐ Yes	include pay	each creditor to whom you pents for domestic support this bankruptcy case.						
	Cre	editor'	s Name and	l Address	Dates of payr	nent	Total amount		Amount you	Was this p	payment for
							paid		still owe		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Creditorio Nome and Address	Dates of navment	Total amount	Amount vou	Mag this payment for
Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Ally Financial P.o. Box 380901 Bloomington, MN 55438	MONHTLY PAYMENT OF \$860.00	\$430.00	\$40,852.00	☐ Mortgage ■ Car ☐ Credit Card
				☐ Loan Repayment
				☐ Suppliers or vendors
				☐ Other
Nissan Motor Acceptanc	MONHTLY	\$340.00	\$9,863.00	☐ Mortgage
Pob 660366	PAYMENT OF	·	. ,	■ Car
Dallas, TX 75266	\$330.00			☐ Credit Card
				☐ Loan Repayment
				☐ Suppliers or vendors
				Other
Freedom Road Financial	MONHTLY	\$210.00	\$5,667.00	☐ Mortgage
10605 Double R Blvd	MOTORCYCLE	Ψ=10100	4 0,001100	■ Car
Reno, NV 89521	PAYMENT \$199.00			☐ Credit Card
				☐ Loan Repayment
				☐ Suppliers or vendors
				Other
Dept Of Education/neln	MONTHLY	\$2,570.04	\$148,301.00	☐ Mortgage
Po Box 82561	STUDENT LOAN		•	☐ Car
Lincoln, NE 68501	PAYMENT			☐ Credit Card
				☐ Loan Repayment
				☐ Suppliers or vendors
				Other_STUDENT LOAN
Within 1 year before you filed for bankru Insiders include your relatives; any general of which you are an officer, director, person a business you operate as a sole proprietor alimony.	partners; relatives of any gen in control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yog g securities; and a	u are a general partner; corporations ny managing agent, including one for
NoYes. List all payments to an insider.				
Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment
ilisidei s Naille alid Address	Dates of payment	paid	still owe	Reason for this payment
Within 1 year before you filed for bankruinsider?	ptcy, did you make any pay	ments or transfer a	any property on a	ccount of a debt that benefited an
Include payments on debts guaranteed or c	osigned by an insider.			
No				
☐ Yes. List all payments to an insider				
Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment
		paid	still owe	Include creditor's name

7.

8.

	otor 1 otor 2	CHRIS J KYRIAKOPOULOS RHONDA S KYRIAKOPOULOS	ssions, and Foreclosures ruptcy, were you a party in any lawsuit, court action, or administrative proceeding? njury cases, small claims actions, divorces, collection suits, paternity actions, support or custody Nature of the case			
Par	t 4:	Identify Legal Actions, Repossessions	, and Foreclosures			
9.	List al modifi	Il such matters, including personal injury ca ications, and contract disputes. No				
	Case		Nature of the case	Court or agency	Status of th	e case
10.	Within Check	e number n 1 year before you filed for bankruptcy k all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.	, was any of your prop	erty repossessed, foreclosed	d, garnished, attached	d, seized, or levied?
	Cred			d	Date	
11.	accou	n 90 days before you filed for bankruptounts or refuse to make a payment becau No Yes. Fill in the details.		luding a bank or financial in:	stitution, set off any a	nmounts from your
	Cred	litor Name and Address	Describe the action the	e creditor took		Amount
Par	court	-appointed receiver, a custodian, or and No Yes List Certain Gifts and Contributions	other official?			
	Gifts per p	with a total value of more than \$600 person on to Whom You Gave the Gift and	Describe the gifts			Value
14.	□ N	n 2 years before you filed for bankrupto No Yes. Fill in the details for each gift or contri		s or contributions with a tota	al value of more than	\$600 to any charity?
	more Char	or contributions to charities that total e than \$600 rity's Name ress (Number, Street, City, State and ZIP Code)	Describe what you	u contributed		Value
	JOR (DEI 4809	DAN KYRIAKOPOULOS BTORS' SON) E. MOSSMAN RD ttsdale, AZ 85260	\$630.00		09/06/19	\$630.00

	otor 1 CHRIS J KYRIAKOPOULOS otor 2 RHONDA S KYRIAKOPOULO	s		Case number	(if known)	
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankr or gambling?	uptcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of thef	t, fire, other disaster
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the log the amount that insurance has paid. Log claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfer	rs				
16.	Within 1 year before you filed for bankr consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No	preparir	ng a bankruptcy petition?			ty to anyone you
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
	Meyer Law, P.C. 1425 W. Elliot Rd #105 Gilbert, AZ 85233 help@arizonabankruptcyhelp.com	l	Attorney Fees		11/01/19 \$125, 11/15/19 \$125, 11/29/19 \$125, 12/13/19 \$125, 12/16/2019 \$3000.00	\$3,500.00
17.	Within 1 year before you filed for bankr promised to help you deal with your cre Do not include any payment or transfer that	editors o	r to make payments to your creditors		r transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have all No Yes. Fill in the details.	our busin rs made a	ess or financial affairs? as security (such as the granting of a se			
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts	Date transfer was made
	Person's relationship to you			paid iii ex	change	
19.	Within 10 years before you filed for ban beneficiary? (These are often called asser ■ No ■ Yes. Fill in the details.			elf-settled tru	ıst or similar device (of which you are a
	Name of trust		Description and value of the prope	erty transferr	ed	Date Transfer was made

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

Par	t 8: List of Certain Financial Accounts, In:	struments, Safe Depos	it Boxes, and Sto	orage Unit	s	
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, ohouses, pension funds, cooperatives, asso No Yes. Fill in the details.	or other financial accou	ınts; certificates	of deposi		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	r bankruptcy, ar	ny safe dep	posit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit o ■ No □ Yes. Fill in the details.	or place other than you	r home within 1	year befor	e you filed for bankrupte	cy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control	for Someone Else				
23.	Do you hold or control any property that so for someone.	meone else owns? Inc	lude any propert	y you borı	rowed from, are storing t	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental Info	ormation				
For	the purpose of Part 10, the following definiti	ons apply:				
	Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of these	he air, land, soil, surfac	e water, ground			
	Site means any location, facility, or property to own, operate, or utilize it, including dispose	•	environmental l	aw, wheth	er you now own, operate	e, or utilize it or used
	Hazardous material means anything an env hazardous material, pollutant, contaminant		as a hazardous	waste, ha	zardous substance, toxi	c substance,
Rep	ort all notices, releases, and proceedings th	at you know about, reg	ardless of when	they occu	ırred.	
24.	Has any governmental unit notified you that	t you may be liable or p	ootentially liable	under or i	n violation of an environ	mental law?
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental un Address (Number, ZIP Code)			onmental law, if you it	Date of notice

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Debto			Case number (if known)							
. н	lave you notified any governmental unit of	any release of hazardous material?								
•	No									
	Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice						
. н	lave you been a party in any judicial or adn	ninistrative proceeding under any env	ironmental law? Include settlements	and orders.						
	No									
	Yes. Fill in the details.									
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case						
art '	11: Give Details About Your Business or	Connections to Any Business								
	Vithin 4 years before you filed for bankrupt	ov did vou own a business or bave ar	ay of the following connections to an	v husinoss?						
. •	☐ A sole proprietor or self-employed in	• •	,	y business:						
			•							
	☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	iip (LLP)							
	☐ A partner in a partnership —									
	☐ An officer, director, or managing executive of a corporation									
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation								
	No. None of the above applies. Go to F	Part 12.								
	Yes. Check all that apply above and fill	in the details below for each business	s.							
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security							
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	number of friid.						
	Vithin 2 years before you filed for bankrupt nstitutions, creditors, or other parties.	cy, did you give a financial statement	to anyone about your business? Incl	ude all financial						
	No									
	Yes. Fill in the details below.									
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued								
art '	12: Sign Below									
e tru th a	read the answers on this <i>Statement of Fin</i> ue and correct. I understand that making a bankruptcy case can result in fines up to 5 S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property,	or obtaining money or property by fr							
s/ C	HRIS J KYRIAKOPOULOS	/s/ RHONDA S KYRIAKOF								
	IS J KYRIAKOPOULOS ature of Debtor 1	RHONDA S KYRIAKOPOL Signature of Debtor 2	ULOS							
_		_								
ate	January 9, 2020	<u> </u>								
	ou attach additional pages to Your Stateme	ent of Financial Affairs for Individuals	Filing for Bankruptcy (Official Form 1	07)?						
No Yes										
		an attenuacite halo (III()								
d yo No	ou pay or agree to pay someone who is not	an attorney to neip you fill out bankru	uptcy torms?							
	s. Name of Person Attach the <i>Bankru</i>	ptcy Petition Preparer's Notice, Declarati	ion, and Signature (Official Form 119).							
		ent of Financial Affairs for Individuals Filing		pag						

Best Case Bankruptcy

Desc

Desc

Fill in this informa	ation to identify your	case:		
Debtor 1	CHRIS J KYRIAK	OPOULOS		
	First Name	Middle Name	Last Name	_
Debtor 2	RHONDA S KYRI	AKOPOULOS		
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ban	kruptcy Court for the:	DISTRICT OF ARIZONA		_
Case number				
(if known)				☐ Check if this is an amended filing

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

identify the cre	editor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's A	lly Financial	☐ Surrender the property.	■ No
name:		☐ Retain the property and redeem it.	
Description of	2017 CHEVY SILVERADO	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	CREW CAB 34,000 miles Location: 4809 E. MOSSMAN	Retain the property and [explain]:	
securing debt:	RD, Phoenix AZ 85054	RETAIN & PAY	
Creditor's E name:	sb/harley Davidson Cr 2015 HARLEY DAVIDSON	 ☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. 	■ No □ Yes
property	FLHTCUL ELECTRA GLIDE ULTRA CL	■ Retain the property and [explain]:	
securing debt:	2-CYLINDERS, 4-STROKE, 1690CC		
	Location: 4809 E. MOSSMAN RD, Phoenix AZ 85054	RETAIN & PAY	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Best Case Bankruptcy

Debt Debt		S J KYRIAKOPOULOS NDA S KYRIAKOPOULOS	Case number (if kr	nown)
De pro	me: escription of operty curing debt:	2017 TRIUMPH STREET CUP 2 -CYLINDERS, 4-STROKE, 900CC	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. ■ Retain the property and [explain]: 	☐ Yes
		Location: 4809 E. MOSSMAN RD, Phoenix AZ 85054	RETAIN & PAY	
	editor's Ni me:	issan Motor Acceptanc	☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a	■ No □ Yes
pr	escription of operty curing debt:	2016 NISSAN VERSA S SEDAN 4D 45,000 miles Location: 4809 E. MOSSMAN	Reaffirmation Agreement. Retain the property and [explain]: RETAIN & PAY	Li Tes
Part	2: List Yo	RD, Phoenix AZ 85054 our Unexpired Personal Property Leases		
			d in Schedule G: Executory Contracts and Unex Inexpired leases are leases that are still in effect	
			f the trustee does not assume it. 11 U.S.C. § 365	
You n	nay assume			
You n	nay assume	an unexpired personal property lease i		i(p)(2).
You n	nay assume cribe your ur	an unexpired personal property lease in nexpired personal property leases		Will the lease be assumed?
You n Desc	ribe your unterprise or some:	an unexpired personal property lease in expired personal property leases TRACI MENDEZ	f the trustee does not assume it. 11 U.S.C. § 365	Will the lease be assumed? ☐ No
Vou n Desc Less Desc	nay assume cribe your un or's name: cription of lea erty:	an unexpired personal property lease in nexpired personal property leases TRACI MENDEZ sed RESIDENTIAL LEASE, \$2150.	f the trustee does not assume it. 11 U.S.C. § 365	Will the lease be assumed? ☐ No
Described Prop	ribe your unor's name: cription of leaderty: Sign Borr penalty of	an unexpired personal property lease in nexpired personal property leases TRACI MENDEZ Sed RESIDENTIAL LEASE, \$2150.	f the trustee does not assume it. 11 U.S.C. § 365	Will the lease be assumed? □ No ■ Yes
Part Unde	r penalty of erty that is s	an unexpired personal property lease in nexpired personal property leases TRACI MENDEZ sed RESIDENTIAL LEASE, \$2150. elow perjury, I declare that I have indicated in ubject to an unexpired lease. J KYRIAKOPOULOS	f the trustee does not assume it. 11 U.S.C. § 365 00 MONTHLY RENT ny intention about any property of my estate tha	Will the lease be assumed? No Yes At secures a debt and any personal
Part Unde	r penalty of erty that is s	an unexpired personal property lease in the personal property leases TRACI MENDEZ Sed RESIDENTIAL LEASE, \$2150. elow perjury, I declare that I have indicated in the ubject to an unexpired lease. J KYRIAKOPOULOS YRIAKOPOULOS	f the trustee does not assume it. 11 U.S.C. § 365 00 MONTHLY RENT ny intention about any property of my estate tha	Will the lease be assumed? No Yes At secures a debt and any personal

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Best Case Bankruptcy

Fill in		nation to identify your case: CHRIS J KYRIAKOPOULOS		neck one box only as di 22A-1Supp:	rected in this form and	l in Form
Debt	tor 2 se, if filing)	RHONDA S KYRIAKOPOULOS		■ 1. There is no presu	umption of abuse	
``	. 0,	Bankruptcy Court for the: District of Arizona		☐ 2. The calculation to		
Office	ed States L	bankruptcy Court for the. District of Arizona			lade under <i>Chapter 7 i</i> cial Form 122A-2).	Means Test
Case (if kno	e number			_ `	,	
(II KIIO	wii)			☐ 3. The Means Test qualified military	does not apply now be service but it could ar	
				☐ Check if this is a	n amended filing	
Off	icial F	orm 122A - 1			Tamonada ming	
			ront Monthly Inc	oomo		10/10
GII	apter	7 Statement of Your Cur	rent Monthly Inc	Joine		12/19
attach case i qualif Part	n a separate number (if I ying militar	and accurate as possible. If two married people at sheet to this form. Include the line number to we known). If you believe that you are exempted from a service, complete and file Statement of Exempticulate Your Current Monthly Income	hich the additional information n a presumption of abuse becau tion from Presumption of Abuse	applies. On the top of aruse you do not have prin	y additional pages, writ narily consumer debts o	e your name and r because of
1.	-	our marital and filing status? Check one on	ly.			
		arried. Fill out Column A, lines 2-11.				
		d and your spouse is filing with you. Fill ou		S 2-11.		
		d and your spouse is NOT filing with you.	• •			
		ng in the same household and are not lega				
	pen	ng separately or are legally separated. Fill of alty of perjury that you and your spouse are leaged apart for reasons that do not include evadir	egally separated under nonba	nkruptcy law that applie	s or that you and your	
10 the	01(10A). For e 6 months,	rage monthly income that you received from all a example, if you are filing on September 15, the 6-m add the income for all 6 months and divide the total he same rental property, put the income from that p	onth period would be March 1 thro by 6. Fill in the result. Do not inclu	ough August 31. If the amoude any income amount mo	unt of your monthly incon ore than once. For examp	ne varied during le, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	payroll de	,	·	\$	\$	
	Column B	and maintenance payments. Do not include is filled in.		\$	\$	
4.	of you or from an un and room	nts from any source which are regularly payour dependents, including child support. married partner, members of your household mates. Include regular contributions from a spont include payments you listed on line 3.	Include regular contributions, your dependents, parents,	\$	\$	
5.	Net incon	ne from operating a business, profession,				
	_		Debtor 1			
		eipts (before all deductions)	\$ -\$			
	•	and necessary operating expenses	· — .	\$	\$	
6		ally income from a business, profession, or farm ne from rental and other real property	11 \$	Ψ	<u> </u>	
0.	MET HICOH	ne nom rental and other real property	Debtor 1			
	Gross rec	eipts (before all deductions)	\$			
		and necessary operating expenses	- \$			
	-	ly income from rental or other real property	\$ Copy here ->	\$	\$	
7.		dividends, and royalties		\$	\$	

				_
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
8.	Unemployment compensation	\$		
	Do not enter the amount if you contend that the amount received was a benefit the Social Security Act. Instead, list it here:			
	For you \$ For your spouse \$			
_	Pension or retirement income. Do not include any amount received that was			
Э.	benefit under the Social Security Act. Also, except as stated in the next senter not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injur disability, or death of a member of the uniformed services. If you received any pay paid under chapter 61 of title 10, then include that pay only to the extent the does not exceed the amount of retired pay to which you would otherwise be enif retired under any provision of title 10 other than chapter 61 of that title.	nce, do e y or retired nat it	\$	
10.	Income from all other sources not listed above. Specify the source and am	nount.		
	Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international domestic terrorism; or compensation, pension, pay, annuity, or allowance paid United States Government in connection with a disability, combat-related injur disability, or death of a member of the uniformed services. If necessary, list otl sources on a separate page and put the total below.	l by the y or		
	·	\$	\$	
		\$	\$	
	Total amounts from separate pages, if any.	+ \$	\$	
Part	each column. Then add the total for Column A to the total for Column B. Determine Whether the Means Test Applies to You		Total current monthly income	
12.	Calculate your current monthly income for the year. Follow these steps:			_,
	12a. Copy your total current monthly income from line 11	Сор	y line 11 here=> \$	
	Multiply by 12 (the number of months in a year)		x 12	_ -
	12b. The result is your annual income for this part of the form		12b. \$	
13.	Calculate the median family income that applies to you. Follow these step	s:		
	Fill in the state in which you live.			
	Fill in the number of people in your household.			_
	Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link sp for this form. This list may also be available at the bankruptcy clerk's office.	pecified in the separa		
14.	How do the lines compare?			
	14a. Line 12b is less than or equal to line 13. On the top of page 1, che Go to Part 3. Do NOT fill out or file Official Form 122A-2.			
	14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, Go to Part 3 and fill out Form 122A–2.	The presumption of	abuse is determined by Form 122A-2.	
Part	3: Sign Below			
	By signing here, I declare under penalty of perjury that the information or	this statement and	in any attachments is true and correct.	
	χ /s/ CHRIS J KYRIAKOPOULOS χ /s	s/RHONDASKY	RIAKOPOULOS	
	CHRIS J KYRIAKOPOULOS	S/ RHONDA S KYRIA RHONDA S KYRIA Signature of Debtor 2	AKOPOULOS	_
	CHRIS J KYRIAKOPOULOS Signature of Debtor 1	RHONDA S KYRI	AKOPOULOS	_

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2 Best Case Bankruptcy

Debtor 1 Debtor 2	CHRIS J KYRIAKOPOULOS RHONDA S KYRIAKOPOULOS	Case number (if known)	
	MM/DD/YYYY	MM / DD / YYYY	
	from the sheet line 4.4s, do NOT fill out on file Force 4.00A O		

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Fill i	n this info	orma	ition to identify you	r case:			
Debt	or 1	CH	IRIS J KYRIAKOP	OUI OS			
					_		
Debt (Spo	or 2 use, if filir		IONDA S KYRIAK	OPOULOS	_		
` '	•	0,	ruptcy Court for the:	District of Arizona			
	e number lown)				_	☐ Check if this is an amended filling	
Off	icial F	orr	n 122A - 1S	upp			
Sta	iteme	nt	of Exemption	on from Presumption	of Ab	use Under § 707(b)(2)	12/15
exem exclu requi	pted from sions in red by 11	n a p this s U.S.	resumption of abus statement applies to C. § 707(b)(2)(C).	e. Be as complete and accurate as position only one of you, the other person sl	ossible. If	ome (Official Form 122A-1), if you believe that you two married people are filing together, and any o plete a separate Form 122A-1 If you believe that	of the
Part	1 Ide	entify	the Kind of Debts	You Have			
1.	personal,	fami		ose." Make sure that your answer is co		C. § 101(8) as "incurred by an individual primarily for the the answer you gave at line 16 of the Voluntary P	
			Form 122A-1; on the ement with the signed		1, There is	no presumption of abuse, and sign Part 3. Then sub	mit this
	☐ Yes. (Go to	Part 2.				
Part	2: D	storm	sina Whathar Militar	y Service Provisions Apply to You			
			•				
2.	□ No.			fined in 38 U.S.C. § 3741(1))?			
	_			while you were on active duty or while	vou were r	performing a homeland defense activity?	
		•	S.C. § 101(d)(1); 32 l	•	, σασ.σ μ	ioneming a nemotion account, i	
		۱o.	Go to line 3.				
	□ Y	es.		on the top of page 1 of that form, checkent with the signed Form 122A-1.	k box 1, <i>Th</i>	ere is no presumption of abuse, and sign Part 3. Th	en
3.	Are you	or ha	ve you been a Rese	rvist or member of the National Guar	rd?		
	□ No.		-	Do not submit this supplement.			
	☐ Yes.	Wer	e you called to active	duty or did you perform a homeland de	efense activ	vity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).	
		۱o.	Complete Form 122	A-1. Do not submit this supplement.			
	□Y	es.		e following categories that applies:			
		_	•	ve duty after September 11, 2001, for	at least	If you checked one of the categories to the left, go 122A-1. On the top of page 1 of Form 122A-1, che <i>The Means Test does not apply now</i> , and sign Pa submit this supplement with the signed Form 122A	eck box 3, rt 3. Then
			90 days and was rel	ve duty after September 11, 2001, for eased from active duty on	,	are not required to fill out the rest of Official Form during the exclusion period. The <i>exclusion period</i> the time you are on active duty or are performing a	122A-1 means a
			I am performing a I	nomeland defense activity for at leas	t 90 days.	homeland defense activity, and for 540 days after U.S.C. § 707(b)(2)(D)(ii).	vard. 11

Official Form 122A-1Supp

_, which is fewer than 540 days before I

☐ I performed a homeland defense activity for at least 90 days,

ending on _______file this bankruptcy case.

If your exclusion period ends before your case is closed,

you may have to file an amended form later.



Gilbert Office & Mailing Address

1425 W. Elliot RD., STE. 105

480-813-9949

480-284-5579 (Fax)

Arizona Bankruptcy Court

Re: Form 122A (Means Test)

For this particular case the Means Test will be only one page. Since this case is primarily non-consumer debts, Form 122A is not required to be completed.

Respectfully,

Haines Meyer, Esq

Fill in		nation to identify your case: CHRIS J KYRIAKOPOULOS		neck one box only as di 22A-1Supp:	rected in this form and	l in Form
Debt	tor 2 se, if filing)	RHONDA S KYRIAKOPOULOS		■ 1. There is no presu	umption of abuse	
``	. 0,	Bankruptcy Court for the: District of Arizona		☐ 2. The calculation to		
Office	ed States L	bankruptcy Court for the. District of Arizona			lade under <i>Chapter 7 i</i> cial Form 122A-2).	Means Test
Case (if kno	e number			_ `	,	
(II KIIO	wii)			☐ 3. The Means Test qualified military	does not apply now be service but it could ap	
				☐ Check if this is a	n amended filing	
Off	icial F	orm 122A - 1			Tamonada ming	
			ront Monthly Inc	oomo		10/10
GII	apter	7 Statement of Your Cur	rent Monthly Inc	Joine		12/19
attach case i qualif Part	n a separate number (if I ying militar	and accurate as possible. If two married people at sheet to this form. Include the line number to we known). If you believe that you are exempted from a service, complete and file Statement of Exempticulate Your Current Monthly Income	hich the additional information n a presumption of abuse becau tion from Presumption of Abuse	applies. On the top of aruse you do not have prin	y additional pages, writ narily consumer debts o	e your name and r because of
1.	-	our marital and filing status? Check one on	ly.			
		arried. Fill out Column A, lines 2-11.				
		d and your spouse is filing with you. Fill ou		S 2-11.		
		d and your spouse is NOT filing with you.	• •			
		ng in the same household and are not lega				
	pen	ng separately or are legally separated. Fill of alty of perjury that you and your spouse are leaged apart for reasons that do not include evadir	egally separated under nonba	nkruptcy law that applie	s or that you and your	
10 the	01(10A). For e 6 months,	rage monthly income that you received from all a example, if you are filing on September 15, the 6-m add the income for all 6 months and divide the total he same rental property, put the income from that p	onth period would be March 1 thro by 6. Fill in the result. Do not inclu	ough August 31. If the amoude any income amount mo	unt of your monthly incon ore than once. For examp	ne varied during le, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	payroll de	,	·	\$	\$	
	Column B	and maintenance payments. Do not include is filled in.		\$	\$	
4.	of you or from an un and room	nts from any source which are regularly payour dependents, including child support. married partner, members of your household mates. Include regular contributions from a spont include payments you listed on line 3.	Include regular contributions, your dependents, parents,	\$	\$	
5.	Net incon	ne from operating a business, profession,				
	_		Debtor 1			
		eipts (before all deductions)	\$ -\$			
	•	and necessary operating expenses	· — .	\$	\$	
6		ally income from a business, profession, or farm ne from rental and other real property	11 \$	Ψ	<u> </u>	
0.	MET HICOH	ne nom rental and other real property	Debtor 1			
	Gross rec	eipts (before all deductions)	\$			
		and necessary operating expenses	- \$			
	-	ly income from rental or other real property	\$ Copy here ->	\$	\$	
7.		dividends, and royalties		\$	\$	

			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
8.	Unemployment compensation		\$	\$	
	Do not enter the amount if you contend that the amount received the Social Security Act. Instead, list it here: For you \$				
	For you \$ For your spouse \$				
9.	Pension or retirement income. Do not include any amount receivement income. Do not include any amount receivement in the Social Security Act. Also, except as stated in the not include any compensation, pension, pay, annuity, or allowand United States Government in connection with a disability, combat disability, or death of a member of the uniformed services. If you pay paid under chapter 61 of title 10, then include that pay only to does not exceed the amount of retired pay to which you would of if retired under any provision of title 10 other than chapter 61 of the	eived that was a e next sentence be paid by the t-related injury o received any ret to the extent that herwise be entitl	, do r ired it	\$	
10.	Income from all other sources not listed above. Specify the so Do not include any benefits received under the Social Security Adreceived as a victim of a war crime, a crime against humanity, or domestic terrorism; or compensation, pension, pay, annuity, or all United States Government in connection with a disability, combat disability, or death of a member of the uniformed services. If necessources on a separate page and put the total below.	ource and amou ct; payments international or llowance paid by t-related injury o	the r		
	·		\$	\$	
			\$		
	Total amounts from separate pages, if any.		+ \$	 \$	
11.	Calculate your total current monthly income. Add lines 2 throueach column. Then add the total for Column A to the total for Col	ugh 10 for umn B.	+ \$	=	
				Total curre income	ent monthly
Part	2: Determine Whether the Means Test Applies to You				
12.	Calculate your current monthly income for the year. Follow th	nese steps:			
	12a. Copy your total current monthly income from line 11		Copy line	11 here=> \$	
	Multiply by 12 (the number of months in a year)			x 12	
	12b. The result is your annual income for this part of the form			12b. \$	
13.	Calculate the median family income that applies to you. Followski	w these steps:			_
	Fill in the state in which you live.				
	Fill in the number of people in your household.			,	
	Fill in the median family income for your state and size of househ To find a list of applicable median income amounts, go online usi for this form. This list may also be available at the bankruptcy cle	ng the link spec	fied in the separate ins		
14.	How do the lines compare?				
	14a. Line 12b is less than or equal to line 13. On the top of Go to Part 3. Do NOT fill out or file Official Form 122	2A-2.			
	14b. Line 12b is more than line 13. On the top of page 1, Go to Part 3 and fill out Form 122A–2.	check box 2, Th	e presumption of abus	e is determined by Form 122A	I-2.
Part					
	By signing here, I declare under penalty of perjury that the ir	nformation on th	is statement and in any	attachments is true and corre	ect.
	χ /s/ CHRIS J KYRIAKOPOULOS	χ /s/ F	RHONDA S KYRIAK	OPOULOS	
	CHRIS J KYRIAKOPOULOS Signature of Debtor 1		ONDA S KYRIAKOF ature of Debtor 2	POULOS	
	Date January 9, 2020	Date Jan	uary 9, 2020		

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2

Debtor 1 Debtor 2	CHRIS J KYRIAKOPOULOS RHONDA S KYRIAKOPOULOS	Case number (if known)	
	MM/DD/YYYY	MM / DD / YYYY	
	If you also also different Annuals NOT CII and an Cia Farra 400A O		

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Fill ir	this info	orma	tion to identify your case:		
Debto	or 1	CH	IRIS J KYRIAKOPOULOS		
Debto	or 2 use, if filin		IONDA S KYRIAKOPOULOS		
Unite	d States	Bank	ruptcy Court for the: District of Arizona		
Case (if kno	number own)				☐ Check if this is an amended filing
Offi	cial F	orr	n 122A - 1Supp		
Sta	teme	nt	of Exemption from Presumption of	Ab	use Under § 707(b)(2) 12/15
exem _l exclus	pted from sions in t ed by 11	n a p this s U.S.	nt together with Chapter 7 Statement of Your Current Monthly resumption of abuse. Be as complete and accurate as possible statement applies to only one of you, the other person should C. § 707(b)(2)(C). The Kind of Debts You Have	le. If t	wo married people are filing together, and any of the
	personal,	fami	s primarily consumer debts? Consumer debts are defined in 11 ly, or household purpose." Make sure that your answer is consistent for Bankruptcy (Official Form 1).		
			Form 122A-1; on the top of page 1 of that form, check box 1, <i>The</i> ement with the signed Form 122A-1.	ere is r	no presumption of abuse, and sign Part 3. Then submit this
	☐ Yes. (-		
Dt			to Mindon Million Control Broadstone Applied Ven		
Part 2			ine Whether Military Service Provisions Apply to You		
	Are you a □ No. (abled veteran (as defined in 38 U.S.C. § 3741(1))?		
	_		ou incur debts mostly while you were on active duty or while you w	vere n	erforming a homeland defense activity?
		•	S.C. § 101(d)(1); 32 U.S.C. § 901(1).	юю р	oneming a nemoralia actorica activity.
		lo.	Go to line 3.		
	ПΥ	es.	Go to Form 122A-1: on the top of page 1 of that form, check box submit this supplement with the signed Form 122A-1.	1, <i>Th</i> e	ere is no presumption of abuse, and sign Part 3. Then
3.	Are you	or ha	ve you been a Reservist or member of the National Guard?		
	□ No.	Con	plete Form 122A-1. Do not submit this supplement.		
	☐ Yes.	Wer	e you called to active duty or did you perform a homeland defense	activ	ity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
		lo.	Complete Form 122A-1. Do not submit this supplement.		
	□Y	es.	Check any one of the following categories that applies:		
			I was called to active duty after September 11, 2001, for at lea 90 days and remain on active duty.	ıst	If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, <i>The Means Test does not apply now</i> , and sign Part 3. Then submit this supplement with the signed Form 122A-1. You
			I was called to active duty after September 11, 2001, for at lea 90 days and was released from active duty on which is fewer than 540 days before I file this bankruptcy case.	nst _,	are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The <i>exclusion period</i> means the time you are on active duty or are performing a
			I am performing a homeland defense activity for at least 90 d	lays.	homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

Official Form 122A-1Supp

, which is fewer than 540 days before I

☐ I performed a homeland defense activity for at least 90 days,

If your exclusion period ends before your case is closed,

you may have to file an amended form later.



Gilbert Office & Mailing Address

1425 W. Elliot RD., STE. 105

480-813-9949

480-284-5579 (Fax)

Arizona Bankruptcy Court

Re: Form 122A (Means Test)

For this particular case the Means Test will be only one page. Since this case is primarily non-consumer debts, Form 122A is not required to be completed.

Respectfully,

Haines Meyer, Esq

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court District of Arizona

In		RIS J KYRIAKOPOULOS ONDA S KYRIAKOPOULOS		Case No.			
			Debtor(s)	Chapter	7		
		DISCI OSURE OF COM	IPENSATION OF ATTOR	NEV FOR DI	FRTOR(S)		
					. ,		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For	r legal services, I have agreed to accept		\$	3,500.00		
	Pri	or to the filing of this statement I have rece	eived	\$	3,500.00		
	Bal	lance Due		\$	0.00		
2.	The sou	arce of the compensation paid to me was:					
	•	Debtor					
3.	The sou	rce of compensation to be paid to me is:					
	•	Debtor					
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.						
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.						
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	 a. [Other provisions as needed] Pre-Petition Services Counseling client(s) regarding bankruptcy; analyzing client(s) debt and asset condition; preparing client(s) bankruptcy petition; filing the appropriate documents with the Court Clerk. 						
		Post-Petition Services Any or all of: Attending the first sc filing responses to motions for reli harassment issues; judicial lien av documents for the Trustee; assisti agreements when requested by cli responding to client(s) questions a	ef; stopping creditor garnishme oidances in garnishment cases; ng client(s) with surrendering se ent(s); counseling client(s) abou	nts; resolving on assisting client(secured collateral; t credit rebuildin	going creditor collection and s) with production of executing reaffirmation g and credit reporting issues;		
6.	By agree	By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances in non-garnishement cases, or any other adversary proceeding.					
			CERTIFICATION				
this	I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in is bankruptcy proceeding.						
	January	9, 2020	/s/ Haines Meyer				
	Date	,	Haines Meyer				
			Signature of Attorney Meyer Law, P.C.	y			
			1425 W. Elliot Rd	#105			
			Gilbert, AZ 85233				
			480-292-7260 Fax				
			<u>help@arizonaban</u> Name of law firm	kruptcyneip.com			

United States Bankruptcy Court District of Arizona

In re	RHONDA S KYRIAKOPOULOS		Case No.			
		Debtor(s)	Chapter	7		
			☐ Check if this is an			
			Amended/Supplemental Mailing List (Include only newly added or changed creditors.)			
		MAILING LIST DECLARATI	ON			
		MALING LIGHT DEGLARATI				
	We. CHRIS J KYRIAKOPOULOS	S and RHONDA S KYRIAKOPOULOS , do h	ereby certify, ur	nder penalty of perjury, that the		
	,	,,	,,,	record formation of Foodure, and and		
Master	Mailing List, consisting of 2 pa	age(s), is complete, correct and consistent wit	th the debtor(s)'	Schedules.		
Date:	January 9, 2020	/s/ CHRIS J KYRIAKOPOULOS	:			
Dute.		CHRIS J KYRIAKOPOULOS	<u> </u>			
		Signature of Debtor				
Date:	January 9, 2020	/s/ RHONDA S KYRIAKOPOULOS				
		RHONDA S KYRIAKOPOULOS	i			
		Signature of Debtor				
Date:	January 9, 2020	/s/ Haines Meyer				
		Signature of Attorney				
		Haines Meyer Meyer Law, P.C.				
		1425 W. Elliot Rd #105				
		Gilbert, AZ 85233				
		480-292-7260 Fax: 480-284-55	79			

MML_Requirements_8-2018 MML-3

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CHRIS J KYRIAKOPOULOS

Best Case Bankruptcy

ALLY FINANCIAL P.O. BOX 380901 BLOOMINGTON MN 55438

CAP1/CABELAS 4800 NW 1ST STREET LINCOLN NE 68521

CAPITAL ONE BANK USA N PO BOX 30281 SALT LAKE CITY UT 84130

CITICARDS CBNA PO BOX 6217 SIOUX FALLS SD 57117

COMENITYBANK/NY&CO PO BOX 182789 COLUMBUS OH 43218

DEPT OF EDUCATION/NELN PO BOX 82561 LINCOLN NE 68501

DISCOVER FIN SVCS LLC POB 15316 WILMINGTON DE 19850

ESB/HARLEY DAVIDSON CR 3850 ARROWHEAD DRIVE CARSON CITY NV 89706

FREEDOM ROAD FINANCIAL 10605 DOUBLE R BLVD RENO NV 89521

HONOR HEALTH PO BOX 845633 LOS ANGELES CA 90084

INTERNAL REVENUE SERVICE PO BOX 7346 PHILADELPHIA PA 19101-7346 JPMCB CARD PO BOX 15369 WILMINGTON DE 19850

NISSAN MOTOR ACCEPTANC POB 660366 DALLAS TX 75266

SOUTHWEST DIAGNOSITC 2323 W. ROSE GARDEN LANE PHOENIX AZ 85027

SPECTRUM DERMATOLOGY PO BOX 844492 LOS ANGELES CA 90084

SYNCB/SAMS CLUB PO BOX 965005 ORLANDO FL 32896

TD BANK USA/TARGETCRED PO BOX 673 MINNEAPOLIS MN 55440

US BANK
CB DISPUTES
SAINT LOUIS MO 63166